Image# 14960757348 PAGE 1 / 17

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full) CHRISTINEPAC PO BOX 4203 Check if different than previously reported. (ACC) WILMINGTON DE 19807 — 19807 — 19807	
ADDRESS (number and street) Check if different than previously WILMINGTON DE 19807	
ADDRESS (number and street) Check if different than previously WILMINGTON DE 1 19807	
ADDRESS (number and street) Check if different than previously WILMINGTON DE 1 19807	
ADDRESS (number and street) Check if different than previously WILMINGTON DE 1 19807	
than previously WII MINGTON DF 19807	
than previously WII MINGTON DF 19807	
2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE	A
C C00492215 3. IS THIS REPORT X (N) OR AMENDED (A)	
(Choose One) Report (No. Yea	ov 20 (M11) on-Election ar Only)
(a) Quarterly Reports:	ec 20 (M12) on-Election ar Only)
X April 15 Ougsterly Report (O1)	n 31 (YE)
July 15 Ouarterly Report (Q2) (C) 12-Day Primary (12P) General (12G) Rur	noff (12R)
Report for the: Convention (12C) Special (12S) October 15 Quarterly Report (Q3)	
January 31 Year-End Report (YE) Election on State of	
July 31 Mid-Year Report (Non-election Year Only) (MY) (d) 30-Day POST-Election General (30G) Runoff (30R) Report for the:	ecial (30S)
Termination Report (TER) Election on State of	
5. Covering Period 01 01 2014 through 03 31 2014	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.	
Type or Print Name of Treasurer MELODIE JOHNSON	
	Y Y Y 2014
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.0	C. §437g.
Office Use Only Rev. 12/2004	

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name **CHRISTINEPAC** 2014 03 2014 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 11678.12 January 1, 2014 (b) Cash on Hand at 11678.12 Beginning of Reporting Period..... 28073.50 28073.50 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 39751.62 39751.62 6(a) and 6(c) for Column B)..... 38140.56 38140.56 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 1611.06 1611.06 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 29097.42 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

CHRISTINEPAC

Report Covering the Period: From:	01 2014	To: 03 31 / 2014
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized(iii) TOTAL (add	4165.00	4165.00
Lines 11(a)(i) and (ii)▶	4165.00	4165.00
(b) Political Party Committees (c) Other Political Committees	0.00	0.00
(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)▶	4165.00	4165.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	20500.00	20500.00
14. Loan Repayments Received	0.00	0.00
 Offsets To Operating Expenditures (Refunds, Rebates, etc.) 		
(Carry Totals to Line 37, page 5)	0.00	0.00
to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	3408.50	3408.50
18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account	7 7 7	
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	28073.50	28073.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶	28073.50	28073.50
'		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating		
	Expenditures	37340.56	37340.56
	(c) Total Operating Expenditures	37340.56	37340.56
2.	(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	37340.30	37340.30
	Committees	0.00	0.00
	Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
4.	Independent Expenditures	0.00	0.00
5.	(use Schedule E)	0.00	0.00
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
7.	Loans Made	0.00	0.00
8.	Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
	Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
9.	Other Disbursements	800.00	800.00
0.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity (from Schedule H6)		
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely		7 7 7
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
1	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	38140.56	38140.56
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	00440.50	20442.50
	from Line 31)▶	38140.56	38140.56

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	4165.00	4165.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4165.00	4165.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	37340.56	37340.56
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	37340.56	37340.56

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 6 OF 17 Use separate schedule(s) (check only one) for each category of the 11b 12 11a 11c Detailed Summary Page **X** 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) CHRISTINEPAC Full Name (Last, First, Middle Initial) CHRISTINE O'DONNELL Date of Receipt Mailing Address PO BOX 4441 2014 01 13 City Zip Code State Transaction ID: SA13.5573 DE WILMINGTON 19807 Amount of Each Receipt this Period FEC ID number of contributing C 12500.00 federal political committee. LOAN FROM PERSONAL FUNDS Name of Employer Occupation SELF-EMPLOYED AUTHOR/SPEAKER Receipt For: Aggregate Year-to-Date ▼ Primary General 12500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** CHRISTINE O'DONNELL Date of Receipt Mailing Address PO BOX 4441 02 21 2014 City State Zip Code Transaction ID: SA13.5575 WILMINGTON DE 19807 Amount of Each Receipt this Period FEC ID number of contributing 8000.00 federal political committee. LOAN FROM PERSONAL FUNDS Name of Employer Occupation SELF-EMPLOYED AUTHOR/SPEAKER Receipt For: Aggregate Year-to-Date ▼ Primary General 20500.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 20500.00 SUBTOTAL of Receipts This Page (optional).....

20500.00

TOTAL This Period (last page this line number only).....

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 OF 17					
ITEMIZED RECEIPTS			for each category of the	(check only one)					
			Detailed Summary Page	11a 11b 11c 12 13 14 15 16 X 17					
	ny information copied from such Reports and St			erson for the purpose of soliciting contributions					
or	for commercial purposes, other than using the	name and a	ddress of any political committee	e to solicit contributions from such committee.					
$ \rangle$	NAME OF COMMITTEE (In Full) CHRISTINEPAC								
_	Full Name (Last, First, Middle Initial)			T					
Α.	,	Date of Receipt							
	Mailing Address 1252 RAMBLING RILL CIR			M = M / D = D / Y = Y = Y					
	City	State	Zip Code	02 07 2014 Transaction ID : SA17.5579					
	STATHAM	GA	30666	Amount of Each Receipt this Period					
	FEC ID number of contributing								
	federal political committee.	C		250.00					
	Name of Employer	Occupation	1	LIST RENTAL INCOME					
	Receipt For:								
	Primary General	Aggregate	Year-to-Date ▼						
	Other (specify) ▼		250.00						
	Full Name (Look Firek Middle Initial)								
В.	Full Name (Last, First, Middle Initial) CONSERVATIVE CONNECTOR			Date of Receipt					
	Mailing Address 435 EAST MAIN STREET	M = M / D = D / Y = Y = Y							
	STE 250	State	Zip Code	02 28 2014					
	GREENWOOD	IN	46143	Transaction ID : SA17.5576 Amount of Each Receipt this Period					
	FEC ID number of contributing								
	federal political committee.	C		2158.50					
	Name of Employer	Occupation		LIST RENTAL INCOME					
	Receipt For:	Receipt For: Aggregate Year-to-Date ▼							
	Primary General	133.534.5		1					
	Other (specify) ▼		2158.50						
	Full Name (Last, First, Middle Initial) POLITICAL INNOVATIONS LLC			Date of Receipt					
•	Mailing Address PO BOX 1902			M = M / D = D / Y = Y = Y					
	City	State	Zip Code	03 31 2014					
	SPRING	TX	77383	Transaction ID : SA17.5577 Amount of Each Receipt this Period					
	FEC ID number of contributing	С		1000.00					
	federal political committee.	C .							
	Name of Employer	Occupation		CONTRIBUTION					
	Receipt For:	Aggregate	_						
	Primary General	133.134.11		1					
	Other (specify)		1000.00						
				0400.50					
5	SUBTOTAL of Receipts This Page (optional)			3408.50					
١,	OTAL This Period (last nage this line number of	nhu)		3408.50					

TOTAL This Period (last page this line number only).....

S	CHEDULE B (FEC Form 3X)								OF 17
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(s) (check only one)					
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	ny information copied from such Reports and Staten for commercial purposes, other than using the nam								
	NAME OF COMMITTEE (In Full)								
angle	CHRISTINEPAC								
\angle	Full Name (Last, First, Middle Initial)				1				
Α.	ANNETTE BURGESS				Date o	f Disburse	ement		
					M M	/ D	D / Y	YY	Y
	Mailing Address 2635 HERITAGE FARM DR				01	C)2	2014	
	City	State	Zip Code						
	WILMINGTON	DE	19808		Trans	action ID	: SB21B.5	553	
	Purpose of Disbursement								
	PAC OFFICE MGMT CONSULTING				Amoun	t of Each	Disbursem	ent this	Period
	Candidate Name			Category/				30	0.00
	Office Sought: House Disburser	nent For:		Туре		7	7		
		Primary	General						
	President	Other (spe	cify) ▼						
_	State: District:								
B	Full Name (Last, First, Middle Initial)				Data o	f Disburse	omont		
В.	ANNETTE BURGESS				M M	/ D		YY	V
	Mailing Address 2635 HERITAGE FARM DR				01)2	2014	_ '
	City S WILMINGTON	State DE	Zip Code 19808		Trans	saction IE) : SB21B.5	554	
	Purpose of Disbursement		19000	_					
	POSTAGE/FOOD & BEVERAGE				Amoun	t of Each	Disbursem	ent this	Period
	Candidate Name			Category/				6	0.25
	Office Sought: House Disbursen	ant For:		Туре					0.20
	Senate Dispulser	Primary	General						
	President	Other (spe							
	State: District:								
	Full Name (Last, First, Middle Initial)				_				
C.	COMCAST					f Disburse			
	Mailing Address ONE COMCAST CENTER				02	/ D)3	2014	Y
	,	State	Zip Code		Trans	saction ID) : SB21B.5	540	
	PHILADELPHIA Purpose of Disbursement	PA	19103						
	UTILITIES				Amoun	t of Each	Disbursem	ent this	Period
	Candidate Name			Category/	7 tillodii	t of Each	Diobarcom		
				Type		,	7	16	3.74
	Office Sought: House Disburser		Conoral						
	Senate President	Primary Other (spe	☐ General cifv) ▼						
	State: District:	Cuioi (opo	Sy) ▼						
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s	UBTOTAL of Disbursements This Page (optional)					- 49		52	3.99
1	OTAL This Period (last page this line number only)			·····					

S	CHEDULE B (FEC Form 3X)	l		FOR LINE NUMBER: PAGE 9 OF 1					
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	e(s) (check only one)					
			Summary Page	X 21b	22	23 28b	24 28c	25 29	26
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Ĺ	NAME OF COMMITTEE (In Full)		2 2 2, points						-
$ \rangle$	CHRISTINEPAC								
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$\overline{}$	Full Name (Last, First, Middle Initial)								
Α.	COMCAST				Date of Disbursement				
	Mailing Address ONE COMCAST CENTER				03	11		2014	Y
	Maining Address ONE COMOACT CENTER				00			2014	
	City	State	Zip Code		Trans	action ID	: SB21B.55	E1	
	PHILADELPHIA	PA	19103		Hallo	action ib	. 36216.33	3 1	
	Purpose of Disbursement UTILITIES				Amount	of Each	Disburseme	nt thic	Pariod
	Candidate Name				Amount	OI Lacii	Disbuiseme	11 11115	renou
				Category/ Type				169	9.50
	Office Sought: House Disburser	nent For:		71:-		,	,		
		Primary	General						
	President	Other (spe	cify) 🔻						
_	State: District:								
R	Full Name (Last, First, Middle Initial) CRC PUBLIC RELATIONS				Date of	Disburse	mant		
٥.	CRC PUBLIC RELATIONS				M M	/ D		Y	V
	Mailing Address 2760 EISENHOWER AVENUE				01	14		2014	
	4TH FLOOR								
	•	State VA	Zip Code		Trans	action ID	: SB21B.55	57	
	ALEXANDRIA Purpose of Disbursement	22314							
	PUBLIC RELATIONS CONSULTING				Amount of Each Disbursement			nt this	Period
	Candidate Name			Category/					
				Type		-		1250	0.00
	Office Sought: House Disbursen								
	Senate President	Primary	General						
	State: District:	Other (spe	city) \blacktriangledown						
_	Full Name (Last, First, Middle Initial)								
C.	CRC PUBLIC RELATIONS				Date of	Disburse	ment		
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	Mailing Address 2760 EISENHOWER AVENUE				02	22	2	2014	
	4TH FLOOR City 5	State	Zip Code						
	ALEXANDRIA	VA	22314		Trans	action ID	: SB21B.55	67	
	Purpose of Disbursement								
	PUBLIC RELATIONS CONSULTING				Amount	of Each	Disburseme	nt this	Period
	Candidate Name		Category/				12500	00	
	Office Sought: House Disburser	ant Fari		Туре			- 7	1200	3.00
	Office Sought: House Disburser Senate	Primary	General						
	President	Other (spe							
	State: District:	, P	- · · •						
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5	SUBTOTAL of Disbursements This Page (optional)							25169	9.50
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ľ	'OTAL This Period (last page this line number only)			••••••					

S	CHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 10 OF 17					
IT	EMIZED DISBURSEMENTS		category of the	(check only one)					
			Summary Page	X 21b 27	22	23 28b	24 28c	25 29	26
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	ny information copied from such Reports and Staten for commercial purposes, other than using the nam								
Ĺ	NAME OF COMMITTEE (In Full)		2 2 23.9 [2 3.10]						
$ \rangle$	CHRISTINEPAC								
\angle									
_	Full Name (Last, First, Middle Initial)				.	(D: 1			
Α.	DELMARVA POWER UTILITY					f Disburse			
	Mailing Address PO BOX 231				02	/ D	3	2014	Y
		State	Zip Code		Trans	saction ID	: SB21B.5	541	
	WILLMINGTON Purpose of Disbursement	DE	19899				. 052.5.0	• • •	
	UTILITIES				Amoun	t of Fach	Disbursem	ent this	Period
	Candidate Name			Category/			11110011		
				Type			7	13	9.80
	Office Sought: House Disburser	nent For:							
		Primary	General						
	President State: District:	Other (spe	cify) 🔻						
_	Full Name (Last, First, Middle Initial)								
В.	DELMARVA POWER UTILITY				Date o	f Disburse	ement		
	DELIVITATION OF THE T				M = M	/ D	D / Y	YY	Y
	Mailing Address PO BOX 231				03	1	1	2014	
	City S WILLMINGTON	State DE	Zip Code 19899		Trans	saction ID	: SB21B.5	552	
	Purpose of Disbursement		13033						
	UTILITIES				Amoun	t of Each	Disbursem	ent this	Period
	Candidate Name			Category/				11	9.61
	0(5			Туре		7	7	- ''	3.01
	Office Sought: House Disbursen Senate	nent For: Primary	General						
		Other (spe							
	State: District:	C (opo	o <i>y</i> , •						
	Full Name (Last, First, Middle Initial)								
C.	GREENVILLE PLACE LLC				Date o	f Disburse	ement		
					M = M	/ D		YYY	Y
	Mailing Address 248 PRESIDENTIAL DRIVE				01	0	2	2014	_
	City	State	Zip Code		_				
	GREENVILLE	DE	19807		Trans	saction ID	: SB21B.5	764	
	Purpose of Disbursement OFFICE RENT								
	OFFICE RENT Candidate Name				Amoun	t of Each	Disbursem	ent this	Period
	Candidate Name			Category/ Type				186	0.00
	Office Sought: House Disburser	nent For:		ı ype	-	7	7		
	Senate	Primary	General						
	President	Other (spe	cify) 🔻						
_	State: District:								
							-	044	2.44
5	SUBTOTAL of Disbursements This Page (optional)			·····•			7	2119	9.41
ļ ,	OTAL This Period (last page this line number only)								
1 '	VIAL THIS I CHOO (last page this line number only)	•••••							

SCHEDULE B (FEC Form 3X)	PAGE 11 OF 17			
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	(orlook only	one) 22 23 23 28a 28b	24 25 26 28c 29 36
Any information copied from such Reports and States or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full) CHRISTINEPAC	ne and address of any poli	nicai committee to	Solicit Continuations IIOI	n such committee.
Full Name (Last, First, Middle Initial)			Data of Dist	
A. GREENVILLE PLACE LLC			Date of Disbursemen	/
Mailing Address 248 PRESIDENTIAL DRIVE			01 28	2014
GREENVILLE	State Zip Code DE 19807		Transaction ID : SE	321B.5767
Purpose of Disbursement OFFICE RENT			Amount of Each Disk	oursement this Period
Candidate Name		Category/ Type		1860.00
Senate President	ment For: Primary General Other (specify) ▼	71	, , , , , , , , , , , , , , , , , , ,	,
State: District: Full Name (Last, First, Middle Initial)				
B. GREENVILLE PLACE LLC			Date of Disbursemen	/ Y Y Y Y Y Y
Mailing Address 248 PRESIDENTIAL DRIVE			03 03	2014
City GREENVILLE	State Zip Code DE 19807		Transaction ID : SE	321B.5768
Purpose of Disbursement OFFICE RENT		· · · ·	Amount of Each Disk	oursement this Period
Candidate Name		Category/ Type		1860.00
Office Sought: House Disbursel Senate President State: District:	ment For: Primary General Other (specify)	,		
Full Name (Last, First, Middle Initial) C. ST. ERMINS HOTEL			Date of Disbursemen	
Mailing Address 2 CAXTON ST			01 / 17	2014
LONDON UK SW1H 0QW	State Zip Code ZZ 99999		Transaction ID : SE	321B.5534
Purpose of Disbursement TRAVEL - MULTIPLE NIGHTS			Amount of Each Disk	oursement this Period
Candidate Name		Category/ Type		255.52
Office Sought: House Disburse	ment For: Primary General Other (specify) ▼			,
SUBTOTAL of Disbursements This Page (optional)		·····	7	3975.52
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 12 OF 17					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only					
	Detailed Summary Page	X 21b		24 25 26			
		27		28c 29 30b			
Any information copied from such Reports and State or for commercial purposes, other than using the							
NAME OF COMMITTEE (In Full)							
CHRISTINEPAC							
/							
Full Name (Last, First, Middle Initial)			D.1 (D.1)				
A. ST. ERMINS HOTEL			Date of Disbursement				
Mailing Address 2 CAXTON ST			01 17	2014			
maining realises 2 SAXTON OT			Q1 II	2014			
City	State Zip Code		Transaction ID : SB	21R 5537			
LONDON UK SW1H 0QW	ZZ 99999		Transaction ib . 3b.	210.3337			
Purpose of Disbursement TRAVEL			Amount of Each Disbu	reament this Pariod			
Candidate Name		Oata mi ii i'	Amount of Each Displ	arcoment this i chou			
		Category/ Type		27.11			
Office Sought: House Disbur	sement For:						
Senate	Primary General						
President	Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial) B. UNITED STATES TREASURY			Date of Disbursement				
5. UNITED STATES TREASURT			M M / D D	Y			
Mailing Address IRS			01 20	2014			
City	State Zip Code		Transaction ID : SB	21B.5562			
Purpose of Disbursement	OGDEN UT 84201						
TAXES			Amount of Each Disbu	ursement this Period			
Candidate Name		Category/		1 1 1 1 1 1 1 1			
		Type		1500.00			
	sement For:						
Senate President	Primary General						
State: District:	Other (specify) ▼						
Full Name (Last, First, Middle Initial)							
C. UNITED STATES TREASURY			Date of Disbursement				
			M M / D D /	Y Y Y Y Y			
Mailing Address IRS			02 22	2014			
City	State Zip Code						
OGDEN	UT 84201		Transaction ID : SB	21B.5568			
Purpose of Disbursement	-						
TAXES			Amount of Each Disbu	ursement this Period			
Candidate Name	7	Category/		1500.00			
Office Sought: House Disbur	sement For:	Туре		7			
Senate Disbut	Primary General						
President	Other (specify)						
State: District:							
'							
SUBTOTAL of Disbursements This Page (optional	l)			3027.11			
TOTAL This Period (last page this line number of	nly)			7			

To each category of the Detailed Summary Page Second Summary Page Second Summary P	SCHEDULE B (FEC Form 3X)	Llea caparata achadula(=)		NE NUMBER: PAGE 13 OF 1				
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) CHRISTINEPAC Full Name (Last, First, Middle Initial) A. UNITED STATES TREASURY Mailing Address IRS City CodDen UT 84201 Purpose of Disbursement TAKES Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Amailing Address City State Disbursement Candidate Name Category/ Office Sought: House President Candidate Name Category/ Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement Category/ Type Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement Category/ Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Office Sought: Amount of Each Disbursement this Period Category/ Type Office Sought: Amount of Each Disbursement this Period	TEMIZED DISBURSEMENTS		X 21b	22 2				
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Candidate Name Category/ Type	City	State Zip Code						
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Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ State: District:								
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Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District:	Purpose of Disbursement							
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ State: District:	Candidate Name		Category/ Type					
SUBTOTAL of Disbursements This Page (optional)	Senate President	Primary General	71					
SUBTUTAL OF DISDUISEMENTS THIS Page (optional)					1500.00			
	SUBTUTAL OF DISpursements This Page (optional)		·····•		1000.00			

SCHEDULE B (FEC Form 3X)	FOR LINE	PAGE 14 OF 17			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only			
	Detailed Summary Page	21b 27	22 23 28b 28b	24 25 26 28c × 29 30	
Any information copied from such Reports and Statem				oliciting contributions	
or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full) CHRISTINEPAC					
Full Name (Last, First, Middle Initial)			5. (5.)		
A. KENT COUNTY REPUBLICAN CM	ITE		Date of Disburseme		
Mailing Address 942A WALKER ROAD			01 28	2014	
,	State Zip Code DE 19904		Transaction ID : S	B29.5565	
DOVER Purpose of Disbursement	DE 19904				
CONTRIBUTION			Amount of Each Dis	bursement this Period	
Candidate Name		Category/		800.00	
Office Sought: House Disbursem	nent For:	Туре		, 11111	
	Primary General				
	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial) B.			Date of Disburseme	nt	
			M M / D D	/ Y Y Y Y Y	
Mailing Address	Mailing Address				
City	City State Zip Code				
Purpose of Disbursement	Purpose of Disbursement				
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Office Sought: House Disbursem	nent For:	туре			
	Primary General				
State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
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Mailing Address					
City	State Zip Code				
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			Amount of Each Dis	bursement this Period	
Candidate Name		Category/			
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	Primary General				
	Other (specify) ▼				
State: District:					
CURTOTAL of Dishurasments This Daws (antique)				800.00	
SUBTOTAL of Disbursements This Page (optional)		·····		, , , ,	
TOTAL This Period (last page this line number only).				800.00	

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the

PAGE 15 OF 17

FOR LINE 13 OF FORM 3X

	Detailed Summary Page FOR LINE 13 OF FORM 3X
AME OF COMMITTEE (In Full)	Transaction ID : SC/10.5573
CHRISTINEPAC	
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:
CHRISTINE O'DONNELL	Primary General
Mailing Address PO BOX 4441	Other (specify) ▼
City WILMINGTON State DE	ZIP Code 19807
Original Amount of Loan Cumulative	e Payment To Date Balance Outstanding at Close of This Period
12500.00	0.00 12500.00
TERMS Date Incurred	Date Due Interest Rate Secured:
M = M / D = D / Y = Y = Y = Y = M = M / E	0.00
01 13 2014	% (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Sou	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
	Than of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
g / teal-eec	
	Amount
City State ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	·
City Otels 71D O. I.	Amount
City State ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	12500.00
OTALS This Period (last page in this line only)	······································
Carry outstanding balance only to LINE 3, Schedule D. fo	r this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

OF 17 PAGE 16 FOR LINE 13 OF FORM 3X

CHRISTINE O'DONNELL Mailing Address PO BOX 4441 City Will MINGTON State DE ZIP Code 19907 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close 8000.00 TERMS Date Incurred Date Due Interest Rate Sec 12/31/14 Date Due O.00 W (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount City State ZIP Code Guaranteed Outstanding: 2. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount City State ZIP Code Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount City State ZIP Code Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Amount City State ZIP Code Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Amount City State ZIP Code Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Amount City State ZIP Code Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Amount City State ZIP Code Guaranteed Outstanding: Amount City State ZIP Code Guaranteed Outstanding:	5	Transaction ID : SC/10.5575		Aiddle Initial)		ME OF COMMITTEE (IN F HRISTINEPAC
City WILMINGTON State DE ZIP Code 19807 Cumulative Payment To Date Balance Outstanding at Close 8000.00 TERMS Date Incurred Date Due Interest Rate Sec 02		Primary General		viidale illiliai)	ELL	CHRISTINE O'DONNELL
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SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 17
FOR LINE NUMBER: (check only one)

9 **X** 10

17

17 OF

NAME OF COMMITTEE (In Full) CHRISTINEPAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **COMPLIANCE CONSULTING** COMPLIANCE CONSULTING LLC Mailing Address PO BOX 365 City State Zip Code **MCLEAN** 22101 Transaction ID: SD10.5761 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 2992.50 2992.50 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **LEGAL CONSULTING** FOLEY & LARDNER LLP Mailing Address 3000 K STREET NW, STE 600 City State Zip Code WASHINGTON DC 20007 Outstanding Balance Beginning This Period Transaction ID: SD10.5760 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 5604.92 0.00 5604.92 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Amount Incurred This Period Outstanding Balance at Close of This Period 8597.42 1) SUBTOTALS This Period This Page (optional)..... 8597.42 2) TOTALS This Period (last page this line number only)..... 20500.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 29097.42 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶